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Proponent Support for
Senate Bill 478 - Implement suicide prevention program
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Going back to the implementation of Community Mental Health Centers in 1963, with the Community Mental Health Centers Act; crisis services have been viewed as a fundamental modality required to keep the entire system whole and to appropriately serve the needs of all individuals in the community. In fact, in his book *Principles of Preventive Psychiatry* in 1964 Gerald Caplan stated the following.

"The significance of a crisis is in its temporal telescoping of development. Major alterations in pattern may occur in a relatively short period and may subsequently remain stable for a long time."

What this phrase means is that 'a crisis', just one crisis, may have long lasting effects on the rest of an individual's life. If we are asked to reflect on our own experience, many of us can readily call up a memory of a critical event, a crisis in our lives, which altered the course of our lives.

What many lay-persons, let alone practitioners, in this day and age may not know is that Dr. Caplan was one of the architects of the Community Mental Health Centers system, and that the book cited above laid out many of the plans that are now embedded in these systems. There, terms like primary, secondary and tertiary care were applied to these systems of care; and it was argued that without all three the system could never be whole. Crisis services are a critical part of a whole behavioral healthcare system.

Making the system whole is an ideal goal, but making the system simply "function" again may be part of the reality that this Bill will bring. As the Committee is no doubt aware, Montana has the second highest suicide rate in the nation and a rate double the mean suicide rate across the nation. There is a crisis in Montana, not just for individuals; but for the entire behavioral healthcare system as a whole.

There have been factors that have degraded the system here in Montana, and factors that have followed national trends as demonstrated in:

- The Carter Administration's effort to appropriately fund and support these systems in 1977 with the Mental Health Systems Act,
- The devastating effects of the Omnibus Reconciliation Act (OBRA) of 1981 which essentially reversed the Carter Administration's move to integrate the system more tightly and fund it appropriately,
- Managed care, which in many cases took dollars out of services,
- And, other forces.

This degradation is chronicled in the President's New Freedom Commission on Mental Health¹, wherein it is clearly stated that (pg 3):

“...one of the most distressing and preventable consequences of undiagnosed, untreated, or under-treated mental illness is suicide. The World Health Organization (WHO) recently reported that suicide worldwide causes more deaths every year than homicide or war.”

Suicide is preventable; and far less costly to address than homicides. Please change the course of behavioral healthcare in Montana, make it whole again for the sake of all Montanans.

¹ The President's New Freedom Commission on Mental Health: Achieving the Promise: Transforming Mental Health Care in America. Rockville, Md, US Department of Health and Human Services, 2003.